FEB 1 8 2005

510(K) SUMMARY

K043440

SMITH & NEPHEW REVISION KNEE SYSTEM

SUBMITTER'S NAME: Smith & Nephew, Inc., Orthopaedic Division SUBMITTER'S ADDRESS: 1450 Brooks Road, Memphis, TN 38116

SUBMITTER'S TELEPHONE NUMBER: 901-399-6707
CONTACT PERSON: Gino J. Rouss

DATE SUMMARY PREPARED: December 13, 2004

TRADE OR PROPRIETARY DEVICE NAME: Revision Knee System

COMMON OR USUAL NAME: Femoral Components, Tibial Components,

Couplers, Wedges, and Stem Extensions

CLASSIFICATION NAME: Knee Joint Patellofemorotibial

Metal/Polymer/Metal Semi-Constrained

Cemented Prosthesis

DEVICE CLASS: Class II

PANEL CODE: Orthopedics/87

DEVICE INFORMATION:

A. INTENDED USE:

The Revision Knee System Components are indicated for rheumatoid arthritis; post-traumatic arthritis; osteoarthritis; degenerative arthritis; and failed osteotomies, unicompartmental replacement; or total knee arthroplasties. The components are designed for use in primary and revision surgery, where the posterior cruciate ligament and one or both of the collateral ligaments (i.e. medial collateral and/or lateral collateral ligament) are absent or incompetent. The Revision Knee Components are for single use only and are intended for implantation with bone cement.

These indications are the same as currently used for the Genesis II Constrained Knee System and Revision Knee System cleared via K962137 and K041106.

B. DEVICE DESCRIPTION:

The Smith & Nephew Revision Knee System contains femoral knee components, tibial components, angled and offset couplers, stem attachments and wedges. The designs of these devices are based upon existing components of the Genesis II Total Knee System and Revision System, previously cleared for market under K951987, K953274, K962137, and K041106.

C. SUBSTANTIAL EQUIVALENCE INFORMATION:

The Smith & Nephew Revision Knee System Components are similar to the following commercially available devices regarding design features, overall indications, and materials:

- Smith & Nephew Revision Knee System (K041106)
- Smith & Nephew Genesis II Total Knee System (K951987, K953274, K962137)
- Zimmer Legacy Constrained Condylar Knee (L-CCK)
- Biomet Oncology Salvage System (OSS)
- Sulzer Orthopedics MOST[™] System

DEPARTMENT OF HEALTH & HUMAN SERVICES



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

FEB 1 8 2005

Mr. Gino J. Rouss Regulatory Affairs Specialist Smith & Nephew, Inc. 1450 E. Brooks Road Memphis, Tennessee 38116

Re: K043440

Trade/Device Name: Revision Knee System Regulation Number: 21 CFR 888.3560

Regulation Name: Knee joint patellofemorotibial polymer/metal/polymer semi-

constrained cemented prosthesis

Regulatory Class: II Product Code: JWH Dated: February 13, 2005 Received: February 14, 2005

Dear Mr. Rouss:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known): K043440 Device Name: Revision Knee System Indications for Use: The Revision Knee System Components are indicated for: 1. Rheumatoid arthritis. 2. Post-traumatic arthritis, osteoarthritis, or degenerative arthritis in older patients whose age, weight, and activity levels are compatible with an adequate long-term result. 3. Failed osteotomies, unicompartmental replacement, or total knee replacement. 4. The constrained knee systems are designed for use in patients in primary and revision surgery, where the posterior cruciate ligament and one or both of the collateral ligaments (i.e. medial collateral and/or lateral collateral ligament) are absent or incompetent. The Revision Knee Components are for single use only and are intended for implantation with bone cement. Over-The-Counter Prescription Χ AND/OR Use (Part 21 CFR 801 Subpart (21 CFR 807 Subpart C) D) (PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED) ence of CDRH, Office d∏Device Evaluation (ODE) (Division Sign-Off) Division of General, Restorative, and Neurological Devices Page 1 of __1___

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